

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| SEE DETERMINATION | AKK 9/17 | | |
| O.I.P.E. CLASSIFIER | MTW | 50 | 08-18-01 |
| FORMALITY REVIEW | CC | 50114 | 9-14-01 |
| RESPONSE FORMALITY REVIEW | AB | 626 | 12/30/01 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|----------------|------|
| Final Original | |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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